DOCUMENT RESUME

ED 251 194 PS 014 728

AUTHOR	Fiene, Richard J.
TITLE	Child Development Program Evaluation Scale.
PUB DATE	Aug 84
NOTE	36p.; For related documents, see PS 014 731-733.
PUB TYPE	Tests/Evaluation Instruments (160)
EDRS PRICE	MF01/PC02 Plus Postage.
DESCRIPTORS	*Certification; Check Lists; Child Caregivers; Child Development; Classroom Environment; Classroom Observation Techniques; Compliance (Legal); *Day Care Centers; Early Childhood Education; *Educational Quality; *Measurement Techniques; Parents; Physical Environment; Predictor Variables; Rating Scales; Teacher Behavior; *Teacher Student Relationship
IDENTIFIERS	*Caregiver Observation Form and Scale; *Child Development Program Evaluation Scale

ABSTRACT

The Child Development Program Evaluation Scale (CDPES) is actually two scales in one, a licensing scale and a quality scale. Licensing predictor items have been found to predict overall compliance of child day care centers with state regulations in four states. Quality scale items have been found to predict the overall quality of child day care centers. Taken together, the two scales measure the following child development program areas: administration, environmental safety, curriculum, health, nutrition, social services, and parental involvement. This document provides the complete CDPES and includes directions for gathering data on each scale item and for scoring the data. Provided also is the Caregiver Observation Form and Scale, an instrument for recording behaviors of caregivers interacting with children in a classroom setting. Forms and criteria for recording caregiver observations are included as well. Practitioners are cautioned against using the indicator checklist methodology before they possess a full year of data collected on a comprehensive compliance instrument. (RH)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

CHILD DEVELOPMENT PROGRAM EVALUATION

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

SCALE

ED251194

Dr. Richard J. Fiene

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
Richard Fiene
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

PS 014728

Dr Richard Fiene is presently Director of Research and Information Systems, Office of Children Youth and Families; and Lecturer, Behavioral Science and Education Division, Pennsylvania State University.

Additional information regarding the CDPES--CHILD DEVELOPMENT PROGRAM EVALUATION SCALES can be obtained from:

Richard Fiene, Ph.D.
Director of Research and Information Systems
Office of Children Youth and Families
1514 North Second Street
Harrisburg, Pennsylvania 17102
or
Behavioral Science and Education Division
Pennsylvania State University
Middletown, Pennsylvania 17057

August 1984

TABLE OF CONTENTS

Introduction

Center Licensing Scale

Health Appraisal
Caregiver Observations
Emergency Contact
Hazard Free
Cleaning Materials/Detergent Accessibility
Supervision of Children
Staff Qualifications
Group Size and Adult Child Ratios
Sufficient Space
Nutrition
Administration of Medication
Safety Carrier
Equipment

Program Quality Scale

Child Development Program
Employee Performance Evaluation
Personnel Policies
Staff Development
Goals and Objectives
Identification of Child's Needs
Social Emotional Development
Physical Development
Cognitive Development
Language Development
Art, Music, and Dramatic Play
Nutrition
Personal Interaction
Self Concept
Ethnic and Cultural Recognition
Special Needs of the Child
Staff Parent Communication
Child's Health Record
Family Confidentiality
Parent Activities
Parent Involvement
Parent Education

COFAS

Introduction

The **Child Development Program Evaluation Scale (Cdpes)** is the result of 10 years of research in the Child Day Care Field. It is a **generic Scale** that incorporates results from Pennsylvania's Child Development Evaluation Instruments, West Virginia's and New York City's Child Development Compliance Instruments, California Child Development Quality Assessment Instrument, NAEYC and CWLA National Standards and the results of the National Day Care Study. The Child Development Program Evaluation Scale was constructed through the use of a Statistical Methodology originally designed in Pennsylvania--Fiene & Nixon's IPM Systems and later refined by the Children's Services Monitoring Consortium--Fiene & Nixon's Indicator Checklist Methodology.

The Child Development Program Evaluation Scale (**Cdpes**) is actually two scales in one. **The Licensing Scale** lists a series of predictor items at the minimal compliance level. These licensing predictor items are statistically significant items that have been found to predict the overall compliance of child day care centers with state regulations in four states' regulations. These items appear to have high face validity when they are compared with national child care standards. The **Quality Scale** lists a series of predictor items at a quality level. These items are statistically significant items that have been found to predict the overall quality of child day care centers. These items also appear to have high face validity when they are compared with national child care standards.

The purpose in constructing the **Cdpe Scale** was the preceived need in the child development program area to have a comprehensive scale that could be used by states or local agencies to determine compliance of child development programs with basic minimal requirements that ensure a child is in a safe and healthy environment. But at the same time the Scale needed to measure the quality of this same child development program. The Scale should be comprehensive but efficient where it could be administered in one day or less by a program monitor/evaluator.

The **Cdpe Scale** is a comprehensive scale that measures the following areas of a child development program: administration, environmental safety, curriculum, health, nutrition, social services, parental involvement. The **37 ITEM SCALE** was selected from nearly 900 Items. These 900 items were from different states' Compliance Instruments. **The 37 Items were selected because of their ability to statistically predict overall compliance. These compliance instruments have been extensively field tested and implemented in each of the respective states over a number of years before the Cdpe Scale was constructed. The Indicator Checklist Methodology is recommended only after a full year of data has been collected using a comprehensive compliance instrument.** See Fiene & Nixon's Indicator Checklist Statistical Model for a full discussion in how these statistical predictors were determined.

The licensing items are to be measured in an all or none fashion, either the program is in compliance or out of compliance on the item. These items are minimally essential items. The second group-Program Quality items are measured at different levels, with each level building on the one previous to it. See the instructions in the Program Quality Section that describes the measurement of this section more clearly. For the Caregiver Observations see the Caregiver Observation Form and Scale (COFAS) at the end of the **Cdpe Scale** for measuring compliance with this section.

Notes on Instructions

Read each item carefully in order to determine complete compliance. Once you have made your decision if the item is in or out of compliance on the **licensing scale**, circle either (0) for out of compliance or (3) for in compliance. For the **program quality scale**, make your determination of which level (1-5) the program passes for each particular item. Circle on the score sheet one of the levels (1,2,3,4,5) or if there are only four levels then circle either (1,2,3,4). The **program quality scale** builds one level upon the other. For a program to pass at a level 3, they must be doing everything at levels 1 and 2. For items 21-26--**SOCIAL EMOTIONAL DEVELOPMENT** to **DRAMATIC PLAY**, your observations should be done in the classroom. If there is more than one classroom, select one classroom randomly and do all your observations for Items 21-26 in that classroom.

After you have completed all thirty seven items, compile the results by each subscale: **Administration (A), Environmental Safety (ES), Child Development Curriculum (CD), Health Services (H), Nutritional Services(N), Social Services (SS), and Transportation (T).** On each subscale line, write in the total scores obtained. Save this score sheet so that when you do a re-administration of the scale, you will have a reference point to compare your results.

CENTER LICENSING SCALE

HEALTH APPRAISAL

All staff, including temporary and substitute employees and volunteers who serve on a regular basis, who come into contact with the children, or who work with food preparation, have a health appraisal within 3 months prior to providing initial day care service and annually thereafter? (Health appraisals shall be certified by a licensed physician.)

OBSERVATIONS

Do activities promote:

(a) development of skills?
(b) self esteem?
(c) positive self-identity?
(d) choice of activities?

(Use COPAS at end of CDPE Scales to determine compliance with this item).

EMERGENCY CONTACT

Is there emergency contact information on each child including the following:

(a) name, address and telephone number of child's physician or source of health care?
(b) home and work addresses and home and work telephone numbers of both parents
(c) name, address and telephone number of emergency contact person?

HAZARD FREE

Are play areas free of hazards and unsafe areas such as open drainage ditches, wells, holes, and heavy street traffic surrounded by fences or natural barriers to limit access of children to hazards?

CLEANING MATERIALS/DETERGENT ACCESSIBILITY

Are all cleaning materials, detergents, aerosol cans and other poisonous and toxic materials kept in a place inaccessible to children and separate from child care areas, food and food preparation areas?

SUPERVISION OF CHILDREN

Do staff supervise the children at all times, both indoors and out?

STAFF QUALIFICATIONS

DO THE GROUP SUPERVISORS HAVE THE FOLLOWING QUALIFICATIONS?

completion of an undergraduate program at an accredited college or university with a bachelor's degree in early childhood education, child development, special education, elementary education or the human services field;
completion of an undergraduate program at an accredited college or university with a bachelor's degree; and teaching certification in early childhood education, child development, special education or human services field; or
completion of an undergraduate program in an accredited college of university with an associate's degree or its equivalent in early childhood education, child development, special education, elementary education or the human services field; and two years work experience related to the care and development of children.

DOES THE DIRECTOR HAVE THE FOLLOWING QUALIFICATIONS:

completion of a graduate program at an accredited college or university with a master's degree in administration, early childhood education, child development, special education, elementary education or the human services field;
completion of an undergraduate program at an accredited college or university with a bachelor's degree in administration, early childhood education, child development, special education, elementary education, or the human services field; and two year work experience related to the care and development of children;or
completion of an undergraduate program at an accredited college or university with an associate's degree or its equivalent in administration, early childhood education, child development,special education, elementary education or the human services field; and four years work experience related to the care and development of children?
Note: Human services field includes psychology, nursing, social work, health related services, home economics, secondary education. It does not include general sociology, art, music, history, mathematics, anthropology, etc.

GROUP SIZE AND ADULT CHILD RATIOS

Developmental Level	Staff	Children	Group Size
Infants	1	5	10
Toddlers	1	4	8
Preschoolers	1	10	20
School Age Children	1	15	30

Mixed Developmental Level	Staff	Children	Group Size
Infants/Toddlers	1	4	8
Infants/Toddlers/ Preschoolers	1	6 no more than 3 infants/toddlers	12
Infants/Preschoolers	1	6 no more than 3 infants	12
Toddlers/Preschoolers	1	6 no more than 3 toddlers	12
Infants/Toddlers/ Preschoolers/School age	1	8 no more than 3 infants/toddlers	16
Infants/Preschoolers/ School age children	1	8 no more than 3 infants	16
Toddlers/Preschoolers/ School age children	1	8 no more than 3 toddlers	16
Infants/Toddlers/ School age children	1	9 no more than 3 infants/toddlers	18
Infants/School age children	1	9 no more than 3 infants	18
Toddlers/School age children	1	9 no more than 3 toddlers	18
Preschoolers/School age children	1	12 no more than 9 preschoolers	24

SUFFICIENT SPACE

Is sufficient (40 square feet per child) space available for each group of children in the center?

NUTRITION

Is food handled, stored, prepared and served in a healthful, safe and sanitary manner, observing principles of food preparation and food services for young children.

ADMINISTRATION OF MEDICATION

Does the facility have any children receiving medication or health aids (i.e., cough drops, aspirin, vitamins, ear drops, aspergum, cough syrup, peroxide, alcohol, ointments, creams, mercurochrome, iodine, methiolate)? If yes, do the records/medicaton log include:

(a) physician's current written instructions for all prescription medication?
(b) parent's current written instruction for all non-prescription medication?
(c) written consent from child's parents for prescription and non-prescription medication?
(d) record of dose and time medication is administered?

SAFETY CARRIER

Is each vehicle equipped with operable age-appropriate safety carriers or restraints for each child?

EQUIPMENT

Is the equipment easily accessible to the children, readily washable, clean, in good repair and free from hazards such as sharp or pointed parts, or toxic or poisonous finishes or materials?

PROGRAM QUALITY SCALE

CHILD DEVELOPMENT PROGRAM

1. The board has approved the overall child development program goals, which include: administration, program activities, staffing, support services, and family/community involvement.
   Verify that the program goals were submitted to the board and approved.

2. The agency has a clearly stated plan to achieve the program goals.
   Verify that there is a plan for achieving program goals and that the plan identifies person(s) responsible for achieving goals.

3. The agency can demonstrate implementation of the plan to achieve overall child development program goals.
   Determine through documentation and observation that the plan is being implemented.

4. The board and staff are involved in the annual review of the program goals.
   Determine through documentation that the board and staff review program goals annually.

5. Parents are involved in the annual review of program goals.
   Verify through documentation and parent interviews that parents are involved in the review of program goals.

EMPLOYEE PERFORMANCE EVALUATION

1. The agency has a policy for performance appraisal of all staff members.
   Interview director to determine agency's policy on performance appraisals of staff.

2. The agency has a written employee evaluation plan designed to improve performance. The plan should include:
   1. Who will do the evaluation
   2. The form to be used in the evaluation
   3. The process for employee evaluation
   4. The process for employee review and response to the evaluation

   Review the agency's written employee evaluation plan.

3. All staff members receive written performance evaluations by their immediate supervisors during the probationary period and thereafter as specified in personnel policices. Employees have the opportunity to respond to the evaluations.
   Review no less than five employee files to verify performance evaluations were conducted according to the plan. From the sample taken, interview staff members to verify that they have the opportunity to respond to their evaluations.

4. Employees participate in setting goals to improve performance.
   Review a sample of the evaluations to verify that mutual goals were established by the employee and supervisor and that the evaluations included these goals.

PERSONNEL POLICIES

1. The board has approved personnel policies that include, but are not limited to:
    1. Employment procedures
    2. Evaluation procedures
    3. Opportunities for upward mobility
    4. Lay-off plan
    5. Description of benefits
    6. Causes for termination
    7. Termination
    8. Grievance procedures
    9. Confidentiality

    Review the agenda and the minutes of the board meeting in which the personnel policies were approved.
    Review personnel policies.

2. The agency has a plan for implementing the board-approved policies.
    Review with director the agency's plan for implementing the personnel policies.

3. The personnel policies are implemented and accessible to each employee.
    Verify that the personnel policies are implemented.
    Interview staff to verify availability and staff awareness of the personnel policies.

4. The agency provides copies of the personnel policies to each employee.
    Ask for a copy of the employees handbook that provides all information on personnel policies. In addition, ask a sampling of approximately 10 percent of the staff members to show their copies to you.

STAFF DEVELOPMENT

1. The agency has an orientation plan for new employees that includes, but is not limited to, statements of:
    1. Philosophy of the agency including program goals and objectives
    2. Policies and procedures, including safety, child health, child abuse reporting, and confidentiality.
    3. Employee benefits and rights.

    Review the orientation plan for the above.

2. The agency has a staff development plan that addresses the following:
    1. Child growth and development
    2. First aid and safety
    3. Discipline
    4. Class room environment
    5. Child abuse determination
    6. Hygiene and health (adult)
    7. Childs health
    8. Cultural awareness
    9. Needs of exceptional children
    10. Nutrition education
    11. Program quality
    12. Child assessments

    Review the staff development plan for the areas listed above.

3. The agency's staff development plan has been implemented.
Review documentation (agendas, minutes of meetings,and training sessions) to verify implementation of the plan.

4. The agency has identified educational resources outside the agency that are available to staff for on-site and off-site training.
Review documentation (memos, letters, minutes of meetings, etc.) to verify that the agency has asked colleges, universities, and other organizations to provide workshops, conference, discussion sessions, training, or visits from representatives.

5. The staff development plan is periodically reviewed, with staff participation, to reflect changing needs of staff and program.
Review documents (e.g., staff evaluations survey and staff meeting discussion) to determine that changing needs were assessed. Verify through interviews staff participation in the developmental plan.

GOALS AND OBJECTIVES

1. Goals and objectives for the developmental program have been formulated and can be articulated by the program director.
Interview the program director.

2. Goals and objectives reflect the developmental needs of pre-school children and can be articulated by the instructional staff.
Interview instructional staff.

3. Program goals and objectives are implemented
Review activity plans to determine that the goals and objectives articulated are being demonstrated.

4. Program goals and objective are evaluated at least annually by the administration, staff, and parents and are modified as needed.
Review documentation to verify that evaluation by the above groups occur at least annually.

IDENTIFICATION OF CHILD'S NEEDS

1. When a child enrolls, information is obtained regarding his or her:
    1. Family background
    2. Physical development
    3. Cognitive development
    4. Social-emotional development

Review 10% (but not fewer than five) of the children's files for intake information. All files should contain information about:

1. **Family background (e.g., language spoken, special dietary concerns, parental attitude toward discipline, relationship with relatives.**
2. **Physical development**
3. **Cognitive development**
4. **Social-emotional development.**

2. The needs of each child are identified by staff members in the following areas:
    1. Social-emotional
    2. Physical
    3. Cognitive
    4. Communicative

    Interview staff members responsible for identification. Verify that there is an identification process that includes the four areas listed. NOTE: Identification process may be formal, including use of standardized tests; or it may be informal, including use of observation.

3. The identification of children's needs are used to develop:
    1. Activity plans for the group as a whole
    2. Activity plans for individual children

    Review records of child needs and compare to activity plans. Interview instructional staff for individual children.

4. The identification of children's needs is both an ongoing process by instructional staff and a periodic process by instructional staff or others. Results of the periodic identification are recorded.
    Review record of periodic identification of children's needs. Interview instructional staff.

5. The goals, objectives, and procedure for identification of children's needs is evaluated at least annually by the administration, staff, and parents.
    Review documentation to verify that evaluation by the above groups occurs at least annually.

SOCIAL-EMOTIONAL DEVELOPMENT

1. Experiences are provided to promote positive social-emotional development.
    Observe program to determine whether positive social-emotional experiences are occurring.

2. Written activity plans reflect activities specifically related to social-emotional development (sharing, caring, handling emotions, dealing with conflict, self-concept, role modeling, etc.).
    Review the written activity plans for activities specifically related to social-emotional development.

3. The activity plan for social-emotional development is implemented and reflects the identified social-emotional needs of the children. Activities are developmentally and culturally appropriate.
    Sample 10% of the children's records for identified social-emotional needs.
    Observe program to verify that:
    1. **Activity plans are implemented.**
    2. **Identified social-emotional needs are addressed.**
    3. **Activities are developmental and culturally appropriate.**

4. Social-emotional development activities are incorporated into all areas of the curriculum.
Observe program.
Interview instructional staff regarding the integration of social-emotional development into all areas of the curriculum.

5. The goals, objectives and activities for social-emotional development are evaluated at least annually by the admininstration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs at least annually.

PHYSICAL DEVELOPMENT

1. Activities are provided to promote large-muscle and small-muscle development.
Observe program to determine whether activities for large and small muscles are provided.

2. Written activity plans reflect specific activities to foster large- and small- muscle development (cutting, jumping, balancing, etc.).
Review the written activity plan for activities specifically related to physical development.

3. The activity plan for physical development is implemented and reflects the identified physical development needs of the children. Activities are developmentally appropriate.
Sample 10% of the children's records for identified physical development needs.
Observe program to verify that:
   1. **Activity plans are implemented**
   2. **Identified physical development needs are addressed.**
   3. **Activities are developmentally appropriate.**

4. Physical development activities are incorporated into all areas of the curriculum.
Observe program.
Interview instructional staff regarding the integration of physical development activities into all areas of the curriculum.

5. The goals, objectives, and activities for physical development are evaluated at least annually by the administration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs at least annually.

COGNITIVE DEVELOPMENT

1. Activities are provided to promote cognitive development.
Observe program to determine that activities for cognitive development are provided (seriation, classification skills through the use of table top toys, etc. should be observed).

2. Written activity plans reflect activities specifically related to cognitive development.
Review the written activity plan for activities specifically related to cognitive development.

3. The activity plans for cognitive development are implemented and reflect the identified cognitive development needs of the children. Activities are developmentally appropriate.
Sample 10% of the children's records for identified cognitive development needs.
Observe program to verify that:
    1. **Activity plans are being implemented.**
    2. **Identified cognitive development needs are addressed.**
    3. **Activities are developmentally appropriate.**

4. Cognitive development activities are incorporated into all areas of the curriculum.
Observe program.
Interview instructional staff regarding the integration of cognitive development into all areas of the curriculum.

5. The goals, objectives , and activities for cognitive development are evaluated at least annually by the administration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs at least annually.

LANGUAGE DEVELOPMENT

1. Activities are provided to promote language development.
Observe program to determine that activities for language development are provided (reading books, flannel board stories, finger plays, group and free play, puppets, picture lotto games, etc.)

2. Written activity plans reflect activities specifically related to language development.
Review the written activity plan for activities specifically related to language development.

3. The activity plan for language development is implemented and reflects the identified language development needs of the children. Activities are developmentally, linguistically and culturally appropriate.
Sample 10% of the children's records for identified language development needs.
Observe program to verify that:
    1. **Activity plans are being implemented.**
    2. **Identified language needs are addressed.**
    3. **Activities are developmentally, culturally, and linguistically appropriate.**

4. Language development activities are incorporated in to all areas of the curriculum.
Observe program.
Interview instructional staff regarding the integration of language development into all areas of the curriculum.

5. The goals, objectives,and activities for language development are evaluated at least annually by the administration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs annually.

ART

1. Art material and equipment are available (a variety of paper, paste and glue, paint, easels, clay, child-size scissors--both left and right-handed, etc.).
   Observe to determine that art materials and equipment are available and in sufficient quantity for the group being served.

2. Written activity plans reflect a variety of art experiences. Art activities include:
   1. Painting (easel, finger, sponge, etc.)
   2. Cut and paste
   3. Drawing/coloring
   4. Molding (clay, playdough, etc.)

   Review the written activity plans for a variety of art experiences.

3. The activity plan for art is implemented, and activities are developmentally appropriate and incorporate children's culture. Art activities include multicultural art experiences.
   Interview staff.
   Observe program to verify that:
   1. **The activity plan for art is implemented.**
   2. **Activities are developmentally appropriate.**
   3. **Art activities incorporate the children's culture.**
   4. **Multicultural art experiences are provided.**

4. Art activities are incorporated into all areas of the curriculum.
   Observe program.
   Interview staff regarding the integration of art into all areas of the curriculum.

5. The goals, objectives and activities for art are evaluated at least annually by the administration, staff, and parents.
   Review documentation to verify that evaluation by the above groups occurs at least annually.

MUSIC

1. Music materials and equipment are available (phonographs, variety of music on records, music instruments, etc.).
   Observe to determine that music materials and equipment are available and in sufficient quantity for the center.

2. Written activity plans reflect a variety of music experiences. Music activities include:
   1. Listening experiences
   2. Singing
   3. Dancing and movement

   Review the written activity plans for the inclusion of a variety of music experiences.

3. The activity plan for music is implemented, and activities are developmentally appropriate and incorporate the children's culture. Music activities include multicultural experiences.
   Interview staff.

Observe program to verify that:

1. **The activity plan for music is implemented.**
2. **Activities are developmentally appropriate.**
3. **Music activities incorporate the children's culture.**
4. **Multicultural music experiences are provided.**

4. Music activities are incorporated into all areas of the curriculum.
Observe program.
Interview staff regarding the integration of music into all areas of the curriculum.

5. The goals, objectives, and activities for music are evaluated at least annually by the administration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs at least annually.

DRAMATIC PLAY

1. Dramatic play materials and equipment are available (house-keeping area, dress up clothes, mirrors, puppets, blocks, both table blocks and floor blocks, etc.)
Observe to determine that dramatic play materials and equipment are available and in suffucient supply for the groups being served.

2. Written activity plans reflect a variety of dramatic play experiences (family, community helpers, grocery, airport, zoo, etc.)
Review the written activity plan for a variety of dramatic play activities

3. The activity plan for dramatic play experiences is implemented. Planned activities are developmentally and culturally appropriate.
Observe program to verify that :
    1. **Activity plans for dramatic play are being implemented.**
    2. **Planned activities are developmentally appropriate.**
    3. **Planned activities are culturally appropriate.**

4. Dramatic play activities are incorporated into all areas of the curriculum.
Observe program.
Interview instructional staff regarding the integration of dramatic play into all areas of the curriculum

5. The goals, objectives, and activities for dramatic play are evaluated at least annually by the administration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs at least annually.

NUTRITION

1. The program provides nutritious meals and snacks for the children.
Review menus for nutritional meal planning (review for 4 basic food groups).
Observe an actual meal.

2. There is a plan to incorporate nutritional concepts, food types and and their origin into the curriculum.
Determine that a formal nutrition curriculum exists.
Review nutrition lessons.

3. There is evidence that the nutritional concept plan has been implemented. Mealtimes are used as learning opportunities. Cultural patterns are incorporated into the curriculum.
Observe mealtime to verify the following:
1. Staff and children eat together.
2. Some conversation at table relates to the food being served.
3. An attempt is made to have children try all foods.
Verify through observation and staff interview that cultural nutrition patterns are incorporated into the curriculum.

4. Children participate in cooking experiences that reinforce nutritional concepts.
Verify that the facility includes equipment for children's cooking experiences.
Review lesson plans to verify cooking experiences and the reinforcement of nutrition concepts.

5. The goals, objectives and activity plan for nutrition are evaluated at least annually by the administration, staff, and parents.
Review documentation to verify that evaluation by the above groups occurs at least annually.

PERSONAL INTERACTION

1. Teaching staff spends time primarily in supervising of and interacting with children.
Review daily assignment schedule for instructional staff and observe to determine that their time is spent primarily in supervising of and interacting with children.

2. Teaching staff is flexible and responsive in interaction with children.
Observe the program for the following:
1. Children are allowed to move freely from activity to activity.
2. A variety of activities are offered from which children may choose.

3. Teaching staff interacts with and responds to each child as an individual.
1. Each child's questions are encouraged and answered.
2. Verbal interactions with children are positive.
3. Children are allowed to choose an individual activity rather than participate in a group activity.
4. Various learning styles are recognized, and activities are planned accordingly.

4. Teaching staff picks up cues that indicate the child's mood and can alter plans and routine as necessary.
Observe the program for the following:
1. Children are permitted to express their feelings (joy, anger, excitement, sadness, grumpiness, etc.) and activities are altered to meet special needs.
2. Staff demonstrate patience with children who show deviant behavior.

5. Teaching staff encourages creativity, allowing playfulness when it occurs and joining in as appropriate.
Observe the program for the following:
1. Children are encouraged to use materials and equipment in innovative ways.
2. Staff laughs, jokes, and uses riddles with children.
3. Children are encouraged to help plan activities.

SELF CONCEPT

1. Each child's space is identified with the child's name clearly written or with a personalized symbol.
Observe individual children's spaces to determine that names are written clearly or that personalized symbols label spaces.

2. Children's photographs, art work, and other contributions are displayed, labeled, and visible at eye level.
Observe to determine that children's photographs, art work and other contributions are displayed, labeled and visible at eye level.

3. Children are given opportunities to experience success.
Observe to determine that children are given opportunities to experience success.
Interview instructional staff for examples.

4. Children are provided opportunities to make decisions and take risks.
Observe.
Interview instructional staff.

5. Children's ideas are accepted and expanded into learning opportunities.
Interview
Ask instructional staff for example.

ETHNIC AND CULTURAL RECOGNITION

1. Information is available to staff regarding traditional ethnic and cultural observances.
Look for program materials in books and media form that are available to staff on ethnic festivals and practices that are applicable to the local community, the nation, and the world.

2. Staff plans for learning opportunities that acknowledge ethnic and cultural backgrounds of the children and the community.
Review the program plans for ethnic and cultural activities.
Interview staff members regarding their plans for activities, e.g., dramatic play, festive costumes, cooking activities, dancing.

3. Planned activities are implemented to enhance a sense of cultural pride on the part of all ethnic groups.
Observe that activities and displays reflect the history and culture of ethnic groups in the community.

4. Teaching staff highlights each child by sharing individual ethnic and cultural backgrounds.
Review program displays and plans. Interview staff regarding how families share traditional customs with the program.

5. Staff provides multicultural experiences that enlarge each child's knowledge of other cultures throughout the world.
Review program plans and learning materials.

SPECIAL NEEDS

1. Staff observes children to identify special needs.
Review observation records and development charts.

2. Staff and parents confer on the staff's observation, and referrals are made as necessary for children with special needs.
Review record of parent conferences and documentation of referrals

3. Staff members are involved in implementing the special needs plan for children.
Review curriculum plans or progress charts to verify that plans are being implemented.

4. The process for meeting special needs of children is reviewed and updated annually.
Review plans for special needs children and note dates of updates.

STAFF-PARENT COMMUNICATION

1. Staff shares highlights of child's day with parents.
Observe to determine whether staff shares information about children when parents bring them to the center or pick them up at the end of the day.

2. At least two scheduled parent conferences are held during the program year.
Review records of parent conferernces.

3. Staff members are available for parent conferences on request.
Interview parents. Ask them whether they can request a conference with staff that is not one of the two regularly scheduled during the program year.

4. The teacher or other staff member visits the child and family at home.
Interview parents and staff members.

USE OF CHILD'S HEALTH RECORD

1. A health record is maintained for each child.
Review 10% (but not fewer than five) of the children's records.

2. A designated staff member reviews the information in each child's health record annually to update it for age-appropriate immunizations, physical exams, and follow-up health care recommended by the physician.
Review 10% of the records to determine that there has been communication with the parent on the need for follow-up.
Verify from the record that necessary referrals to health care services have been made

3. Parents are in formed of any need for health care follow-up and are given referrals as necessary.
Review 10% of the records to determine that there has been communication with the parent on the need for follow-up.
Verify from the record that necessary referrals to health care services have been made.

4. The health record documents that appropriate health care was obtained.
Review 10% ofthe records to verify follow-ups.

5. The agency is successful in getting low-cost or free resources to meet children's health needs.
Ask the agency's representative to show you evidence of efforts made to secure needed health care services especially for children

FAMILY CONFIDENTIALITY

1. Confidential discussions with parents occur in privacy.
Observe tc see that space is available.

2. A written policy pertaining to confidentiality of family records and information has been adopted by the governing board and includes provisions for:
   1. Maintenance of eligibility and family service records in secure files.
   2. Limited access to the above information
   3. Release of information from family records.
   4. Need for written permission to use photographs of children for purposes outside the program, to release confidential information, and to allow children to participate in research.

Review board approved written policy on family confidentiality.

3. The agency's confidentiality policy is implemented, and all staff and parents received a copy of the policy.
Review any documents that would demonstrate that the policy is being implemented.
Verification might include permission forms, specification of persons who have access to the files, and observation that confidential files, and observation that confidential files are maintained in a secure location.
Interview a sample of parents and staff to verify their receipt of the written policy on confidentiality.

4. The board annually reviews the agency's confidentiality policy.
Ask to see any documentation that this has taken place. such documentation might include minutes of parents' meetings, minutes of board's review of the policy, etc.

FAMILY/PARENTS ACTIVITIES FOR PROGRAM SUPPORT

1. Information concerning family/parents' resources (time, skills, interests) is requested.
   Review evidence that at the intial enrollment interview, or shortly thereafter, an inventory of parents' skills, time, and interests is compiled.

2. Family/parents are invited to assist in program support activities.
   Review evidence such as admission polices, written materials sent to parents, bulletin boards, and agendas of parents' groups and board of directors.

3. Family/parent work with staff in organizing program support activities.
   Review evidence such as minutes of parents' groups, flyers, and notices to parents.

4. Family/parents are involved in establishing program support activities.
   Review evidence such as minutes of parents' groups, calendars of events, flyers, and notices to families.
   Interview parents or members of the family and staff.

5. Family/parents work with staff in the evaluation of program support activities.
   Review minutes of parents' groups and staff meetings to see whether program support activities organized by staff and parents were evaluated.

PARENTS' INVOLVEMENT WITH CHILDREN IN PROGRAM

1. Parents are invited to the center to visit and observe.
   Review evidence indicating that parents have been invited.

2. There are oppoirtunities for parents to be involved with children in the program.
   Review documentation or interview parents to verify that there are opportunities for parents to be involved in the program.

3. Agency has an open-door policy to encourage parents to participate in program during the daily schedule.
   Review evidence such as: parent participation sign-in-sheet, parent handbook, bulletin board, newsletter ,letters to parents.
   Interview staff and parents. Ask for news item that indicates that that parents have been involved in activities.
   Observe parent involvement in activities such as the following:
   1. **Ethnic food preparation**
   2. **Cultural activities (drama, dance, art, handcraft)**
   3. **Assistance in special holidays and multiethnic activities.**

4. Parents participate in activities for children in the program.
   Review documentation to verify that parents or families are participating in activities for children in the program.

5. Parents take ideas and activities home for follow-up and reinforcement.
Interview staff to verify that parents are provided ideas and activities to be used with their children outside of school.
Interview sampling of parents or family members who have participated.

PARENT EDUCATION

1. Parents are invited to attend parent educational activities.
Review flyers, notices to parents, bulletin board, and minutes of parents' meetings.

2. Educational interests and needs of parents are identified.
Interview parents and review documentation to determine that interests and needs of parents are identified.

3. Educational activities for parents are designed and implemented based on parents' needs and interests.
Review notes that parents' educational activities reflect parents' needs and interests as identified.

4. Educational workshops are offered at least three times a year.
Review schedule of educational workshops to verify that they are offered at least three times a year.
Check dates of announcements and newsletters to parents.

5. Long-term training programs (e.g., language, and vocational skills) are identified, and parents are made aware of the programs.
Review examples of information and literature lists made available to parents.

CHILD DEVELOPMENT PROGRAM EVALUATION SCALE

LICENSING SCALE	SUB SCALE CODE	OUT OF COMPLIANCE	IN COMPLIANCE
1. HEALTH APPRAISAL	H	0	3
2. OBSERVATIONS (Level I-3; Levels II-IV-0)	CD	0	3
3. EMERGENCY CONTACT	H	0	3
4. HAZARD FREE	ES	0	3
5. CLEANING MATERIALS/DETERGENT ACCESS	ES	0	3
6. SUPERVISION OF CHILDREN	CD	0	3
7. STAFF QUALIFICATIONS	A	0	3
8. ADULT CHILD RATIO/GROUP SIZE	A	0	3
9. SUFFICIENT SPACE	ES	0	3
10. NUTRITION	N	0	3
11. ADMINISTRATION OF MEDICATION	H	0	3
12. SAFETY CARRIER	T	0	3
13. EQUIPMENT	ES	0	3

PROGRAM QUALITY SCALE		QUALITY LEVELS
14. CHILD DEVELOPMENT PROGRAM	A	0 1 2 3 4 5
15. EMPLOYEE PERFORMANCE EVALUATION	A	0 1 2 3 4
16. PERSONNEL POLICIES	A	0 1 2 3 4
17. STAFF DEVELOPMENT	A	0 1 2 3 4 5
18. GOALS AND OBJECTIVES	CD	0 1 2 3 4
19. IDENTIFICATION OF CHILD'S NEEDS	CD	0 1 2 3 4 5
20. SOCIAL EMOTIONAL DEVELOPMENT	CD	0 1 2 3 4 5
21. PHYSICAL DEVELOPMENT	CD	0 1 2 3 4 5
22. COGNITIVE DEVELOPMENT	CD	0 1 2 3 4 5
23. LANGUAGE DEVELOPMENT	CD	0 1 2 3 4 5
24. ART	CD	0 1 2 3 4 5
25. MUSIC	CD	0 1 2 3 4 5
26. DRAMATIC PLAY	CD	0 1 2 3 4 5
27. NUTRITION	N	0 1 2 3 4 5
28. PERSONAL INTERACTION	CD	0 1 2 3 4 5
29. SELF CONCEPT	CD	0 1 2 3 4 5
30. ETHNIC AND CULTURAL RECOGNITION	CD	0 1 2 3 4 5
31. SPECIAL NEEDS OF THE CHILD	CD	0 1 2 3 4
32. STAFF PARENT COMMUNICATION	SS	0 1 2 3 4
33. CHILD'S HEALTH RECORD	H	0 1 2 3 4 5
34. FAMILY CONFIDENTIALITY	SS	0 1 2 3 4
35. PARENT ACTIVITIES	SS	0 1 2 3 4 5
36. PARENT INVOLVEMENT	SS	0 1 2 3 4 5
37. PARENT EDUCATION	SS	0 1 2 3 4 5

CDPES SUB SCALES:

ADMINISTRATION (A)	0.....24
ENVIRONMENTAL SAFETY (ES)	0.....12
CHILD DEVELOPMENT CURRICULUM (CD)	0.....69
HEALTH SERVICES (H)	0.....14
NUTRITIONAL SERVICES (N)	0.....8
SOCIAL SERVICES (SS)	0.....23
TRANSPORTATION (T)	0....3

CAREGIVER OBSERVATION FORM AND SCALE (COFAS)

This is the Caregiver Observation Form and Scale (COFAS) for recording behaviors of caregivers while interacting with children in a classroom setting. This form can be used with any age group of children between infancy and 12 years of age.

Please follow the steps listed below for filling out the form and in calculating the scores for the COFAS Scale.

STEP 1:

Fill in the needed information as shown below before beginning your observations of each caregiver.

Example:	Caregiver #1
No. of children present at the beginning of caregiver observation:	7
No. of adults (excluding yourself) present at the beginnin of caregiver observation:	2
Time of Observation:	9:30 a.m. p.m.
Name of caregivers observed:	Louise Martin

STEP 2:

Observe each caregiver for 10 consecutive two-minute periods, pausing between observations to record. For each two-minute period, observe then record whether or not you observed each behavior listed on the form. Record by using either a "1", "3", or "4" code in the block corresponding to the observation period you are in. Use the "1" code if you <u>did</u> observe the specified behavior, "3" if you <u>did not</u> observe the specified behavior, and the "4" if you are <u>unsure</u> of whether you observed the behavior. Before you go to the next observation period, be sure that each block for that observation period has either a "1", "3", or "4" code in it.

STEP 3:

For each observation period record the type of activity being done by the caregiver during your observation (e.g. listening to records, reading stories, art project).

STEP 4:

After you have recorded all of your observations, it will be necessary to multiply these observations by the weights attached to each of the specific behaviors observed. You will note that in the far right-hand column there are a series of numbers. These numbers are the weights that you multiply the individual observation blocks by. For example, in "Speak unsolicited to a child", let's say you observe this 6 out of 10 observation blocks:

		OBSERVATION BLOCKS										
		1	2	3	4	5	6	7	8	9	10	
Speak unsolicited to child	1	1	1	3	4	1	1	3	1	1	4	+2

To obtain the score for this paricular behavior, you do the following:

- add all the (1)'s = 6
- multiply that number (6) by the weight in the right-hand column: 6 X (+2) = +12

That gives you your score (+12) for this specific behavior. Three's and four's (3) & (4) are equal to zero (0) and are not added in. They do not affect the score positively or negatively.

Let's use another example, go to "Use food as reinforcement". Let's say you observe this 2 out of 10 observation blocks:

		OBSERVATION BLOCKS										
		1	2	3	4	5	6	7	8	9	10	
Use food as a reinforcement	13	1	1	3	3	3	3	3	3	3	3	-3

To obtain the score for this particular behavior, you do the following:

- add all the (1)'s = 2
- multiply that number (2) by the weight in the right-hand column: 2 X (-3) = -6

That gives you your score (-6) for this specific behavior. Three's and four's (3) & (4) are equal for zero (0) and are not added in. In this case, by default, they do affect the score positively.

Proceed with all the particular behaviors, as you did above. Then total your scores as follows:

Item		Score
	1	+12
	2	+ 5
	3	+12

Item		Score	
	4		+3
	5		0
	6		+1
	7		-3
	8		0
	9		-1
	10		+15
	11		+2
	12		0
	13		-6
	14		0
	15		0
	16		0
	17		0
	18		0
	19		0
	20		0
	21		+5
	22		0
	23		0
	24		0
	25		0
	26		0
	27		0
	28		0
	29		0

Calculate you total score:

Total score = +50

Now check this total score against the scale for COFAS:

RATING	LEVEL	RANGE IN SCORES
Good	I	(+30) to (+130)
Fair	II	(-10) to (+29)
Poor	III	(-99) to (-11)
Non-optimal	IV	(-1560) to (-100)

CAREGIVER OBSERVATION SCALE

CAREGIVER OBSERVATION FORM AND SCALE (COFAS)

This form is designed to be used by the monitor in recording specific observations of caregivers' child development activities during a 30-minute period.

No. of children present at the beginning of the caregiver observation 7
No. of adults present at the beginning of a caregiver observation 2
Time of observation 9:30 AM Name of caregiver Louise Martin

	During your observation did the caregiver:		Two-minute Observation Periods 1	2	3	4	5	6	7	8	9	10	Weights
LANGUAGE	Speak unsolicited to a child	01	1	1	3	4	1	1	3	1	1	4	+2
	Use the child's dialect	02	3	3	1	1	3	1	1	3	1	3	+1
	Respond verbally to a child's speech	03	1	1	3	1	3	1	3	1	1	3	+2
	Read or identify pictures to a child	04	3	3	3	3	3	3	3	1	1	1	+1
	Sing or play music with a child	05	3	3	3	3	3	3	3	3	3	3	+1
	Speak slowly and clearly to a child at all times	06	3	3	3	3	3	1	3	3	3	3	+1
	Interrupt or cut off a child's verbalization	07	4	3	3	3	3	#	3	3	3	1	-3
	Scream or yell at children	08	3	3	3	3	3	3	3	3	3	3	-30
	Allow noise level to become so high it is hard for observer to understand children	09	3	3	1	3	3	3	3	3	3	3	-1
SOCIO-EMOTIONAL	Give affectionate physical contact to child	10	3	3	4	3	1	4	1	1	1	1	+3
	Make activity suggestion to a child	11	3	1	3	3	3	3	1	3	3	3	+1
	Physically punish a child	12	3	3	3	3	3	3	3	3	3	3	-100
	Use food as reinforcement	13	1	1	3	3	3	3	3	3	3	3	-3
	Make fun of or ridicule a child	14	3	3	3	3	3	3	3	3	3	3	-30
	Let other children make fun of or ridicule a child	15	3	3	3	3	3	3	3	3	3	3	-30
	Verbally criticize, scold or threaten a child	16	3	3	3	3	3	3	3	3	3	3	-30
	Isolate a child physically	17	3	3	3	3	3	3	3	3	3	3	-1
	Ignore a child's request	18	3	3	3	3	3	3	4	3	3	3	-5
	Interrupt a child's activity and prevent its completion	19	3	3	3	3	4	3	3	3	3	3	-5
	Leave the child alone	20	3	3	3	3	3	3	3	3	3	3	-40
MOTOR	Foster development of child's gross motor skills	21	1	1	1	1	1	3	3	3	3	3	+1
COGNITIVE	Show impatience or annoyance with child's questions	22	3	3	3	3	4	4	3	3	3	3	-2
	Use terms which are above a child's reasoning ability	23	3	3	3	3	4	3	3	3	3	3	-3
	Deal in abstract concepts without concrete examples	24	3	3	3	3	3	3	3	3	3	3	-3
	Show intolerance with a child's mistakes and not accepting faulty thinking	25	3	3	3	3	3	3	3	3	3	3	-2
CARE-GIVING	Prepare or serve food for a child	26	1	1	3	3	3	3	3	3	3	3	0
	Prepare activities or arrange the room	27	3	3	1	3	3	3	1	1	3	3	0
	Do nothing	28	3	3	3	3	3	3	3	3	3	3	-15
	Talk with other adults	29	3	3	3	3	3	3	3	3	3	3	-5

Record the type of activity: (e.g., listening to records, reading a story, art project, etc.) Snack Cognitive Games

Criteria for Recording Caregiver Observation

01. Speak unsolicited to a child.

Infant, Preschooler & School Age - any time an adult makes any type of verbalization to a child where the child has not initiated or spoken to the adult first. The important aspect here is that the adult is the initiator and not the child.

A----->C, not C------>A
(1) (3)

02. Use the child's dialect.

Infant, Preschooler & School Age - the adult (caregiver) speaks in the child's appropriate dialect or attempts to use the child's dialect (e.g., Black Appalachian, creole or pidgins dialects). The important aspect here is that the adult is sensitive to cultural differences as it relates to language. Although there is a standard form of English which is generally used in public schools in a formal setting; sensitivity and acknowledgement of a child's cultural underpinnings expressed through his dialect should be fostered in the preschool language. There should be an opportunity for both standard English and the child's particular dialect to be used. Just using standard English with no regard for the child's dialect should be scored a "3".

03 Respond verbally to a child's speech.

Infant - any verbalization, including baby talk, cooing, babbling to the infant is appropriate. The child will initiate with a verbalization and then the adult responds.

C----->A & A----->C (1) C----->A but the adult does <u>not</u> respond (3)

The baby talk, cooing and babbling to the infant is appropriate in the first 12-18 months depending on the individual child's developmental level.

Toddler & Preschooler - from 18 months and above, the adult when she/he responds to the child should not be cooing, babbling, or engaging in baby talk. The adult should be expanding on the child's speech, acting as a model for the child.

School-Age - the adult should engage in adult-type verbalization with the child.

DEVELOPMENTAL MILESTONES - LANGUAGE

child does:

- 3 months - spontaneously laughs, attends to voice with smiling/cooing
- 6 months - coos to music, babbles extensively; turns to sound of bell
- 9 months - says "da-da"; mocks sounds in the environment
- 12 months - follows simple instructions; imitates words
- 15 months - two word vocabulary; indicates wants by pointing
- 18 months - ten definite words in vocabulary; asks for two things by appriopriate words

21 months - combine two words to form short phrase/sentence
24 months - labels any three common objects; "what's this?"--
cat, dog, etc.
27 months - uses plurals, knows first name when asked
30 months - three word sentences are present; knows concept of "one"
33 months - knows last name and sex; uses "I" or self-reference
36 months - four word sentences are present
39 months - gives first and last name; names most common
objects and pictures
42 months - complete sentences used consistently; knows concepts
of "animals", "toys"
45 months - identifies three colors; show me the blue one; sings
simple song
48 months - comprehends: "what do we do when hungry"; grasps
number concept "two"
51 months - mastery of Y,J,K,G,F, and D sounds; repeats a five
word sentence
54 months - averages five-word sentences; follows a sequence of
three directions
57 months - tries to use new words spontaneously; understands some
abstract words
60 months - no infantile speech is present; name or labels at
least six colors

The adult should be fostering in the child the above developmental areas or at least their attainment. Adult should not be fostering in a child a lower developmental level if the child is operating at a higher level.

04 Read or identify pictures to a child

Infant, Preschooler, School-age - whenever the adult takes time with a child to help the child recognize, pick out, identify, etc. pictures in picture books or help a child to read at the older age ranges. (Code 1)

05 Sing or play music with a child

Infant, Preschooler, School-age - whenever an adult sets up a musical experience either by playing an instrument, singing songs, rhythm band, etc. If the children are actively mobile, i.e., marching then code "1" for (21) gross motor skills, If the children are sitting and listening to music do not code (1) for (21).

06 Speak slowly and clearly to children at all times

Infant, Preschooler and School-age - the adult takes the time in how she/he talks to the child. Concern here is with the speech of the adult, is it clear, well enunciated so that you as an observer can easily understand what she/he is saying. Code "1". If, the adult rushes her/his sentences with little care given to the child's understanding of what is said, code "3".

07 Interrupt or cut off a child's verbalization

Infant, Preschooler & School-age - anytime that an adult does not let a child finish what they started to say. This is not as appropriate with infants because of the egocentric nature of their verbalizations. With toddlers 18 months plus, preschoolers and school-age children, so long as the adult cuts off the child's verbalization, code "1".

08 Scream or yell at children

Infant, Preschooler & School-age - anytime an adult raises his/her voice to get the attention of the classroom, reprimand a child, etc., code "1".

09 Allow noise level to become so high that it is hard for an observer to understand what is being said.

Infant, Preschooler, & School-age - anytime during your observations where it becomes difficult to hear what individual children or caregivers are saying. Anytime that it becomes so noisy that it is disturbing the children and adults and distracting where children and adults are not completing things they have started, code 1.

10 Give affectionate physical contact to a child

Infant, Preschoolers & School-age - anytime the caregiver picks a child up, pats a child on the head, rocks an infant, has a child sit on the caregiver's lap, kisses a child, hugs a child, puts an arm around a child, code "1".

11 Make activity suggestion to a child

Infant, Preschoolers & School-age - the caregiver actually demonstrates or guides the child to another activity, gives suggestions or alternatives for activities, code "1".

12 Physically punish a child

Infants, Preschoooolers & School-age - code "1" if you see a caregiver hit,push, shake, pull a child violently.

13 Use food as reinforcement

Infants, Preschoolers & School-age - anytime that the caregiver sets up a contingency that if you don't do this you will not get dessert, or eat, etc. Also, at mealtime, if the caregiver does not give the child dessert for not eating the main meal. Code "1".

14 Make fun or ridicule a child

Infants, Preschoolers & School-age - anytime that the caregiver either takes the child aside or in front of everyone present and brings undue attention to a child's idiosyncracies, handicaps, etc., which embarass the child or lower the child's self-image, or to make the child feel that there's something wrong with me. Code "1".

15 Let other children make fun or ridicule a child

Infant, Preschoolers & School-age - if the caregiver makes no attempt to re-direct children who are making fun of another child, to get them interested in another activity, or to work with the children in getting at the roots of the particular problem. Code "1".

16 Verbally criticize, scold or threaten a child

Infant, Preschoolers & School-age - the caregiver does not physically do anything but threatens she/he will, puts a child down through scolding but does not shout nor make fun of the child, but is very direct in his/her criticism. Code "1".

17 Isolate a child physically

Infant - if a child acts up, the caregiver either confines the infant in a crib or play pen by physically removing the child from whatever she/he was doing. Note the length of isolation and place, Code "1". Place your note on reverse side of the observation.
Toddler, Preschooler, School-age - if a child acts up, the caregiver either has the child sit in a chair by himself, removes him from the room, puts him in a time-out bay. This is done physically where the adult tells the child and if no response actually removes the child from the activity. Record the time and place of isolation, Code "1". Place your note on the reverse side of the observation.

18 Ignore a child's request

Infants, Preschoolers, & School-age - anytime that a child either makes a verbal or non-verbal request (infant tugging at caregiver) and caregiver doesn't respond. The caregiver doesn't even acknowledge the child by saying I'll answer that later or with a pat on the head. Code "1".

19 Interrupt a child's activity and prevent its completion

Infants, Preschoolers, & School-age - whenever an adult ignores individual skills of children and makes them complete the same activity at the same time. There is no built-in factor for individual differences and having children work at their individual pace--Code "1".

20 Leaves the children alone

Infants, Preschoolers, & School-age - whenever the caregiver, no matter what the reason, leaves the children unattended, Code "1".

(Instruction: If the adult leaves with someone else watching the children and will return shortly, interrupt your observations and continue when she/he returns. If the caregiver will not be returning for a long period of time, then observe the remaining caregiver.)

21 Foster Development of a child's gross motor skills

Infants - any activity which involves rolling, sitting up, pulling up, walking, crawling, etc., Code "1".
Preschoolers & School-age - any activity which involves running, somersaulting, twisting, jumping, calesthetics, etc., gymnastics (supervised by adult), Code "1".

22 Show impatience or annoyance with child's question

Infants, Preschoolers & School-age - anytime that a child asks a question, and the caregiver is quick to answer to get rid of the child or is visibly annoyed that the child asked the question, Code "1".

23 Use terms which are above a child's reasoning ability

Infants - whenever the caregiver uses terms and expects the children to retain the information, i.e., knowledge of colors, numbers, alphabet, sizes and shapes. Using these as descriptions on the caregivers part is o.k., but not to expect the children to use the same descriptions, Code "1".
Preschoolers - whenever the caregiver uses terms and expects the children to retain the information, i.e., knowledge of notions of association, transitivity, conservation of area, numbers, etc., Code "1".
School-age - up to 10 or 11. To expect the children to solve verbal or hypothetical problems, Code "1".

24 Deal in abstract Concepts without concrete examples

Infants, Preschoolers & School-age - (to 11 yrs) presentation of an activity such as shapes without having a two dimensional or three dimensional model for the children to see, touch, manipulate. Counting without the actual physical objects present, Code "1".

25 Show intolerance with a child's mistakes & not accepting faulty thinking

Infants, Preschoolers & School-age - too much emphasis placed upon "there is only one correct answer"! Not sensitive to a child's thinking being very different from an adults. For example, an infant learns about objects by mouthing them. A preschooler is egocentric, cannot transfer learning, centers on one particular perceptual entity, cannot reverse his thinking. A school-age child (more than 11 yrs) cannot solve problems involving the future, Code "1".

26 Prepare or serve food for a child

Infant - preparing baby food, setting up high chair, warming a bottle, feeding a child by bottle or spoon, Code "1".
Preschooler & School-age - setting up table, serving food or helping child to serve food, Code "1".

27 Prepare activities and/or arrange the room

Infant, Preschoolers, & School-age - whenever the caregiver is engaged in perparing for an upcoming activity (getting materials organized) or arranging room (placement of tables or chairs) or while the activity is going on (helping a child complete the activity), Code "1".

28 Do nothing

Caregiver is detached from children and other adults; staring into space, not on a break. Not responsive, Code "1".

29 Talk with other adults

Conversation is directed to other adults -- while ignoring children--Code "1". If the conversation involves having other adults help out or to plan activities, then code "3".

CAREGIVER OBSERVATION FORM AND SCALE (COFAS)

This form is designed to be used by the monitor in recording specific observations of caregivers' child development activities during a 30-minute period.

No. of children present at the beginning of the caregiver observation _____
No. of adults present at the beginning of a caregiver observation _____
Time of observation _____ Name of caregiver _____

	During your observation did the caregiver:		Two-minute Observation Periods 1	2	3	4	5	6	7	8	9	10	Weights
LANGUAGE	Speak unsolicited to a child	01											+2
	Use the child's dialect	02											+1
	Respond verbally to a child's speech	03											+2
	Read or identify pictures to a child	04											+1
	Sing or play music with a child	05											+1
	Speak slowly and clearly to a child at all times	06											+1
	Interrupt or cut off a child's verbalization	07											−3
	Scream or yell at children	08											−30
	Allow noise level to become so high it is hard for observer to understand children	09											−1
SOCIO-EMOTIONAL	Give affectionate physical contact to child	10											+3
	Make activity suggestion to a child	11											+1
	Physically punish a child	12											−100
	Use food as reinforcement	13											−3
	Make fun of or ridicule a child	14											−30
	Let other children make fun of or ridicule a child	15											−30
	Verbally criticize, scold or threaten a child	16											−30
	Isolate a child physically	17											−1
	Ignore a child's request	18											−5
	Interrupt a child's activity and prevent its completion	19											−5
	Leave the child alone	20											−40
MOTOR	Foster development of child's gross motor skills	21											+1
COGNITIVE	Show impatience or annoyance with child's questions	22											−2
	Use terms which are above a child's reasoning ability	23											−3
	Deal in abstract concepts without concrete examples	24											−3
	Show intolerance with a child's mistakes and not accepting faulty thinking	25											−2
CARE-GIVING	Prepare or serve food for a child	26											0
	Prepare activities or arrange the room	27											0
	Do nothing	28											−15
	Talk with other adults	29											−5

Record the type of activity: (e.g., listening to records, reading a story, art project, etc.)